PTO/S8/01 (08-05)
Approved for use through 07/31/2008, OMS 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE der the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of informatio Attorney Docket Number armation unless it contains a valid OMB control numb RP-01283-US2 **DECLARATION FOR UTILITY OR** First Named Inventor Bedard et al. DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date Declaration Submitted after initial Declaration Unknown ~ Submitted OR Art Unit Unknown With mittet Filing (surcharge (37 CFR 1.16 (e)) Filing Examiner Name Unknown (beniuper I hersby declare that: Each inventor's residence, maiting address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is cialmed and for which a patent is sought on the invention entitled: Latch (Title of the Invention) the specification of which is attached hereto was filed on (MM/DDMYY) as United States Application Number or PCT International and was amended on (MM/DD/YYYY) (If applicable). Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. Foreign Filing Date (MM/DD/YYYY) Prior Foreign Application Number(s) Priority Certified Copy Attached? Country Not Claimed No Yes

[Page 1 of 2]

This collection of Information is required by 35 U.S.C. 115 and 37 CFR 1.63. The Information is required to obtain or relatin a benefit by the public which is to till fund by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 123 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including pathwring, prespring, and submitting the completed application from to the USPTO. These will very deepending upon the latitude case. Any comments on the amount of time you require to complete this form another suppositions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NDT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

PTO/58/01 (08-03)

Approved for use through 07/31/2006, OMB 0851-0032

U.S. Palent and Yrademerk Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB conjuty number. **DECLARATION** — Utility or Design Patent Application Correspondence address below OR Direct all correspondence to: Customer Number: 28735 Name Address ZIP State Fax Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filled for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name Given Name Bedard or Sumame (first and middle [if any]) Yvon Date Inventor's Signature (E0/11/86 Citizenship Country State Residence: City Canadian Canada Orford, Quebec Mailing Address 128, Chemin Simoneau Country ZIP State City Canada J1X 6S4 Offord, Quebec A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name Given Name (first and middle [if any]) Desmarais Jean-François or Sumame Inventor's Signature / Citizenship Country Residence: City State Canadian Canada Radne, Quabec Mailing Address 425 Principale Country ZIP State City Canada JOE 1Y0 Racine, Quebec supplemental shoot(s) PTO/SB/02A or 02LR graphod hereto.

[Page 2 of 2]

Additional inventors or a legal representative are being named on the

PTC/SB/81 (06-03)

Approved for use through 11/30/2009. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unknown
Filing Date	Unknown
First Named Inventor	BEDARD et AL
Art Unit	Ugknows
Examiner Name	Unknows
Attorney Docket Number	RP-01283-US2

Practitioners at Customer Number								
OR Practitioner(s) named below: Name	l hereb	y appoint					-	
Practitioner(s) named below: Name			Customer Number	2873	5	<u> </u>		
Assignee of record of the entire interest. See 37 CFR 3.71. State Assignee of record of the entire interest. See 37 CFR 3.71. State S		-	amed below:					
as my/our attorney(s) or agent(s) to prosecute the application Identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address Address Address Address Address I arm the: Applicant/Inventor. Assignae of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/St). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyea Signature Date V36/11/03 Telephone 450-533-5100 ptr 5.246 NOTIE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple				· · · · · · · · · · · · · · · · · · ·		Doelstrotion	Alexande	
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple			Name			Registration	i Munin	er
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	į –							
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple								
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	İ							
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple								
business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/6). Signature Date Date Date Telephone 4 50 - 53 - 5100 fcr 5 746 NOTIE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	i		· *** · · ·					
The above-mentioned Customer Number: OR The address associated with Customer Number: OR Film or Individual Name Address City State Zip Country Telephone Fax I arm the: Applicant/Inventor. Assignee of record of the entire Interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/S8/98). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yvan Signature Date VSK/II/O3 Telephone 4 50 - 53 2 - 5100 Ekt 5 796 NOTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(a) are required. Submit multiple	as my/ou business	r attomey(s) on the United	r agent(s) to prosecut States Patent and Tre	e the application demark Office c	Identi onnec	fied above, and led therewith.	to trans	sact all
The above-mentioned Customer Number: OR The address associated with Customer Number: OR Film or Individual Name Address City State Zip Country Telephone Fax I arm the: Applicant/Inventor. Assignee of record of the entire Interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/S8/98). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yvan Signature Date VSK/II/O3 Telephone 4 50 - 53 2 - 5100 Ekt 5 796 NOTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(a) are required. Submit multiple	Place re		the corresponder	and address for f	he shr	identified an	nlicatio	in to:
The address associated with Customer Number: OR Firm or Individual Name Address Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyan Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		-	-		ile am	Ap-ingituies eb	Pricario	
The address associated with Customer Number: OR Firm or Individual Name Address Address City Country Telephone I am the: Applicant/inventor. Applicant/inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyps Signature Date Date VSK/II/O3 Telephone 450-532-5100 Ext 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		above-mentior	160 Customer Number					
Firm or Individual Name							 7	
Firm or Individual Name	☐ The a	address assoc	iated with Customer N	lumber:			ļ	
Firm or Individual Name Address Address City State Zip Country Telephone Fax I arn the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Sistement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyan Signature Applicant or Assignee of Record Note: Signature Applicant or Assignee of Record Telephone 450-533-5100 Est 5796 NOTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple								
Individual Name Address Address City Stale Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTOSB/S6). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyan Signature Date VARIMO3 Telephone 450-530-5100 Ext 5.796 NOTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple								
Address City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyon Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		-				•		
City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Sistement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyon Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Address							
Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Fam PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyou Signature CAN DAY NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Address							
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyou Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	City				State		Zip	
l am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyou Signature Date Date V_S(11/0 3) Telephone 450-533-5100 Ekt 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Country							
Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyph Signature Date Date V_S/II/O 3 Telephone 450-533-5100 Ext 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Telephone				Fax			
Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyph Signature Date Date V_S/II/O 3 Telephone 450-533-5100 Ext 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	1 am the	.•						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Farm PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yyou Signature Date Date V_S/II/O 3 Telephone 450-533-5100 Ext 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		-	•					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name BEDARD, Yvon Signature Date Date V_S/11/03 Telephone 450-533-5100 Ek7 5796 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple								
Name BEDARD, Yyon Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Ass	signee of record of	if the entire interest. See 37 CFR 3.73(b) is enclosed. (F	' CFR 3.71. Form <i>PTO/SB/96</i>).				
Signature Date V38/II/O3 Telephone 4 50- 533-5100 EKT 5 796 NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple					Ignee	of Record		
Date V38/II/03 Telephone 450-533-5100 EKT 5746 NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Name	BEDAR	D, Yvor					
Date V38/IV/03 Telephone 450-533-5100 EXT 5746 NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Signature	de	160a 20					
NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Date	1/38	711/03		Telepho	one 450-53	2-5	100 EXT 5796
		res of all the inver	nters or assignees of record	I of the entire interes				
		02	forms are submitted.			 	-	

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the including case. Any comments on the arround of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/S8/81 (08-03)
Approved for use through 11/30/2005. OMB 0551-0035
U.S. Petent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unknown
Filing Date	Unknown
First Named Inventor	BEDARD et Al.
Art Unit	Unknown
Examiner Name	Uzknowa
Attorney Docket Number	RP-01283-US2

I hereby appoint:					
Practitioners at OR Practitioner(s) no	Customer Number	28735			
	Name		Re	gistration Numb	ber
			1		
		,			
l.					
	or agent(s) to prosecute States Patent and Trace				sact all
OR	ange the corresponden ned Customer Number. clated with Customer No	r. 	above-iden	utified applicatio	n to:
Firm or Individual Name					
Address					
Address					,
City		Sta	118	Zip	
Country Telephone		Fac	<u>.</u>		
			<u> </u>		
l am the: Applicant/Invantor.					
Assignee of record of	of the entire interest. See 37				
Statement under S7	CFR 3.73(b) is enclosed. (Fr	Applicant or Assign	nee of Reco		
Name DESMA	RAIS, Jean-François	Approximation	100 to 11	14	
Signature	0-20	~~~			
Date 29	1112003	Tel	lephone (4	150) 532 -	4966
NOTE: Signatures of all the invermultiple	ntors or assignees of record				
	forms are submitted.	<u> </u>			

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.